## Application Form

## Academic Exchange/Training courses abroad Faculty of Engineering, Kasetsart University

Academic year.....

1. First Name (Mr./Ms.):	Family Name:		
Student ID: Department:			
Major Field of Study:e-mail:	Telephone:		
Student's academic status:			
Undergraduate: First year Second year Third year Fourth year			
Master: First year Second year			
PhD: First year Second year Third year	ar Fourth year		
Cumulative GPA			
2. Current address while studying at Kasetsart University:			
Permanent address:			
3. Officially recognized English standard test score (			
4. Reasons for applying in the exchange program abroad:			
5. Name and address of institute at which you wish	n to participate:		
6. Duration you intend to do your exchange: From	(dd/mm/yy) <b>to</b> (dd/mm/yy)		
7. Contact person details, if any, at host institute(	Name, E-mail, Telephone number):		
8. Interested Courses or Activities you intend to pa	articipate		

9. I have attached the following documents:		
Transcript		
Resume/CV		
Other (Please specify):		
10. Parents Confirmation		
	Written at	
	Date	
I (Mr./Ms.)		(a parent/guardian) of
(Mr./Ms.)	acknowledge the d	letails of the program, including the
expenses that may occur, and permit (Mr./Ms.)		
Student ID Major field of study		
Faculty of Engineering, Kasetsart University, to app	oly for this exchange p	rogram in order to further his/her
academic development.		
Sig	gnature	(Parent/Guardian)
	(	)
	Date	
11. Advisor Certification		
Comment on student's attitude and condu	uct	
	3	Advisor
	(	)
	Date	
12. I,, (student	t's name) confirm t	that every detail written on this
application form is absolutely true.		
	Signature	(Student)
	(	)
	Date	
For IUP officers only		
This student has been admitted to		Country
from:to		
This student cannot participate in the exchange program at this time because		
		Date: